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 14 May 2013 , 10:45 AM

#1

QuidSapio

Thinker

Join Date: 19 Apr 2013

Posts: 219

Threads: 2

Thanked 769 Times in 194 Posts



The Alleged Medical Witnesses

If it's ok with the mods I thought it might be a good idea to keep an ongoing list here and to update the initial post as new info emerges. Any more suggestions for names to be included?

Sushrut Jangi MD

<http://connects.catalyst.harvard.edu...ay/Person/6626>

Role in Boston Marathon bombing:

Claims to have been in the medical tent.

What they claim to have observed:

"At the first blast site,[another doctor] saw bodies piled on top of each other in an area maybe 20 feet by 40 feet..."

...An injured woman — I couldn't tell whether she was conscious — lay on the stretcher, her legs entirely blown off. Blood poured out of the arteries of her torso; I saw shredded arteries, veins, ragged tissue and muscle....

"Clear the aisles!" Andersen called. More victims followed: someone whose legs had been charred black, another man with a foot full of metal shrapnel, a third with white bone shining through the thigh. I watched in shock as the victims were rushed down the center aisle to ambulances at the far end of the tent.

Many of us barely laid our hands on anyone. We had no trauma surgeons or supplies of blood products; tourniquets had already been applied; CPR had already been performed...many of us watched these passing victims in a kind of idle horror, with no idea how to help.

I drifted among the beds, ashamed that there was no other skill I could contribute. Nearly every physician I saw looked back at me with the same numb, futile expression..."

<http://www.nejm.org/doi/full/10.1056/NEJMp1305299>

Questions:

- I can't help noticing your description of the first blast site - **"bodies piled on top of each other in an area of maybe 20 feet by 40 feet"** - bears no resemblance to any known photographic image of the site, even those taken immediately after the explosion.

- I am curious about the identity of the woman you describe as having her legs "**entirely blown off** ." The only female double-amputee I am currently aware of is Celeste Corcoran, and her injuries in no way resemble that description. Her legs were not blown off, they were (allegedly) partially amputated after the fact. It isn't Celeste...so, *who is it?*
- The injuries you describe, "**blood pour[ing] out of her torso**" means major vessels, such as the aorta or vena cava were ruptured, which would result in almost instant death. So this lady must be one of the two that died. But *neither of the women who died sustained such an injury*
- You would seem to have witnessed a non-existent victim Dr Jangi. Does that concern you at all?
- Your description of what happened inside the medical tent: "**I watched in shock as the victims were rushed down the center aisle to ambulances at the far end of the tent.**" - suggests the most severe trauma victims were not treated inside but removed straight to hospital.
- But then you go on to say "**We had no trauma surgeons or supplies of blood products... I drifted among the beds, ashamed that there was no other skill I could contribute. Nearly every physician I saw looked back at me with the same numb, futile expression...**" which suggests the opposite, that severe trauma victims were being put in beds inside the tent and "treated" there even though there was nothing you could do for them.
- Which is true?
- If the latter - why? Why even attempt to deal with severe trauma victims in an unequipped medical tent when there were major hospitals no more than five minutes away?

Stephen Segatore, RN

<https://www.facebook.com/stephen.segatore>

Role in Boston Marathon bombing:

Claims to have been in the medical tent and to have been with Krystle Campbell when she died.

What they claim to have observed:

April 16:

"One of his first patients was a young woman, he thinks maybe 20 or 22 years old, whose abdomen was torn open. Her left leg was broken and facing the wrong way and she wasn't breathing. He and his colleagues did CPR on her and kept checking for a pulse, but there was none. They stopped when they realized it was futile."

<http://edition.cnn.com/2013/04/16/us...ombings-nurses>

April 26:

"...a woman arrived in critical condition, struggling to breathe...Segatore scanned her wounds, mostly on the left side of her body. One leg was twisted backwards, and she had a wound near her left hip. She had black markings on her head, possibly residue from being so close to the blast.

She had already been given several minutes of CPR by those who rushed her into the tent. Segatore offered her comforting words before taking over CPR.

I'm a nurse, he told her. You're in a tent at the finish line.

He tried to resuscitate her. They stopped CPR briefly to hook up a heart monitor. The screen showed squiggly lines, but the heart wasn't pumping blood. There was no pulse. The physician said to

stop. "We knew what we had," Segatore said..."

<http://edition.cnn.com/2013/04/22/he...rst-responders>

Questions:

- Why did you change your story between April 16 and April 26?
- Why on April 16 did you claim Krystle Campbell's abdomen was "torn open" when photographs from the day show it was not even lacerated?
- Why did you later drop this claim in favor of a vague story of a wound "near her left hip"?
- Why in one story do you claim Krystle was conscious and in another that she was unresponsive? As an RN how could you be unsure of a factor as important as this?
- Why do you claim her leg was turned backwards when it does not appear to be in any condition remotely like this in the one clear photograph we have of her?
- As a nurse with 18-yrs experience, are you in the habit of referring to the output from a heart monitor as "**squiggly lines**"?

Jim Asaiante, RN

<http://www.linkedin.com/pub/james-asaiante/52/12a/7b>

Links to the military

Role in Boston Marathon bombing:

Claims to have been in the medical tent. Says the experience was similar to his tour of duty in Iraq.

<http://www.nurseuncut.com.au/nurses-of-boston/>

Betty Sparks, RN

<http://www.linkedin.com/pub/betty-sparks/1b/236/310>

Role in Boston Marathon bombing:

Claims to have been in the medical tent.

<http://www.nationalnursesunited.org/...boston-bombing>

Martin S. Levine, DO

<http://www.osteopathic.org/inside-ao...in-levine.aspx>

Role in Boston Marathon bombing:

Claims to have been at the medical tent prior to the bombing and to have rushed out to triage the victims. Like Asaiante he made a point of comparing the scene to a "war zone."

<http://www.foxnews.com/health/2013/0...orrific-scene/>

What they claim to have observed:

"I noticed immediately that people were lying in heaps, their legs either blown off, severely wounded or deformed completely..."

One woman, who had sustained severe injuries to the back of her legs, was urging medical personnel to evacuate her husband, who had lost his leg around the knee. Two women Levine believed to be friends were laying in a heap together, their legs extremely deformed, as they desperately tried to get loved ones on the phone."

Questions:

- Just as with **Dr Jangi** (see above) you describe a scene **"...people were lying in heaps, their legs either blown off, severely wounded or deformed completely,"** that is, at best, an exaggeration of anything visible in the photographic evidence.
- Who is the man who had **"lost his leg around the knee"** and whose wife sustained **"severe injuries to the back of her legs"**?
- Who were these people? Can we identify them as any known victims?

Richard Guynes, MD

<http://www.jacksonheart.com/about/ph.../dr.guynes.htm>

Role in Boston Marathon bombing:

Claims to have been at the medical tent and to have treated Krystle Campbell. <http://www.msnewsnow.com/story/22008...n-medical-tent>

What they claim to have observed:

"The first 10 to 20 were many gruesome injuries that I, of course, would not have ever seen as a cardiologist," Guynes explained.

Guynes' section helped stabilize those who didn't have life-threatening injuries. But other doctors were calling for assistance throughout the tent.

*"I did have the opportunity to try to help a lady. **Krystle Campbell, I believe is her name**, who did ultimately pass away, unfortunately. She was already in shock and had bled a great deal before she made it into the tent. **Her face, I've seen it on television. She looks completely different than when I saw her in the tent,**" said Guynes.*

Questions:

- How usual is it for out of town physicians to be part of the Boston Marathon Medical team? And who invited you to join?
- How many medical people worked on Krystle Campbell altogether?
- As a physician do you wonder - and were you told - why severely injured patients were transferred to an inadequately prepared first aid tent rather than being taken to hospital asap?

Jocelyn Hirschman, MD

<http://www.healthgrades.com/physicia...irschman-3bfbx>

Role in Boston Marathon bombing:

Claims to have been at the medical tent and helped treat severely injured victims.

<http://bolingbrook.patch.com/article...hon-explosions>

What they claim to have observed:

"The BAA medical teams and Boston EMS were amazing," Hirschman said. "They immediately converted the tent into a mass casualty triage center and organized us into teams to assist in

stabilizing the injured. Despite the harrowing and gruesome images I will always carry with me, I also remember the true heroes of the day - the Boston EMS, the athletes and the brave injured."

Questions:

- A "**mass casualty triage center**"? The entire point of [triage](#) is that it gets people moved away to treatment ASAP. You tag the victims by injury-status at the scene, and the most severely injured (usually tagged red) are removed directly to hospital. You do NOT engage bystanders to move all the casualties 100 yards down the road, in *wheelchairs*, to a *first aid tent* and then "triage" them there – because that would be dumb, useless and people would die who would otherwise be saved.
- You're a physician. You have to know this is true. Why are you either talking bullshit or letting someone ghost bullshit in your name?

Kim Giroux, RN

<http://www.linkedin.com/pub/kim-giroux/16/811/b17>

Role in Boston Marathon bombing:

Claims to have been working in "Medical Tent A"

<http://tewksbury.patch.com/articles/...ike-a-war-zone>

What they claim to have observed:

In moments, Tent A transformed from a post-race triage unit, dealing with dehydration and the loss of electrolytes, to a full-blown trauma unit. Scores of casualties were brought in for emergency care. It was unlike anything the seasoned nurse had ever experienced.

"I had worked in an ER, so I'd seen (traumatic) injuries, but nothing like this. There was just lots and lots and lots of damage," said Giroux. "There were two people who were (declared) dead in Tent A. There were traumatic amputations, one man with both legs blown off by the explosion. There were people impaled by metal and glass -- compound fractures. It was like a war zone."

When children began being brought in for treatment, Giroux turned her attention toward them, putting her skills as a pediatric nurse to good use...

Questions:

- You worked in an ER – but *never* witnessed a severe road traffic accident, industrial accident, self-inflicted shot gun wound, or any physical injury comparable with the broken legs and amputations you saw during this incident?
- May I ask where this amazingly luck emergency room is located? I want to live in that magical town.
- You describe the first aid tent as being turned into a "**full blown trauma unit**." Maybe the trauma units you worked in had no blood or emergency surgery, but most "full blown trauma units" have these things.
- It's why they are called "trauma units."
- Otherwise what you have is a first aid tent with an "intensive care" sign in one corner.
- staffed by podiatrists....



Kim Kilby, MD

http://www.amc.edu/physiciandirector...f_rec_no=16204

Role in Boston Marathon bombing:

Claims to have been working in medical tent and to have been sent out to "triage" victims on site.

<http://www.legislativegazette.com/Ar...-Marathon.html>

What they claim to have observed:

"Kilby called the transition between treating runners and triage "instantaneous" saying there were perhaps a few moments of chaos among the doctors, but they transitioned quickly.

'Triage was set up in three different levels depending on how critically ill a patient is. Level one, the most grave, involved patients who were unconscious, having respiratory trouble, cardiovascular troubles and a large amount of bleeding that could cause either cardiovascular or respiratory difficulty. Level three, on the other hand, targeted people who were awake and alert but have an obvious injury, but their neurological and cardiovascular status was stable.'

The tent Kilby and her team were working in was 75 to 100 yards away from the finish line, close to where the initial blast occurred. Kilby was immediately put in charge of the second layer of triage toward the front of the medical tent.

'There were two doctors stationed outside of the medical tent and they would either triage people to my section, in the chairs or straight into the medical tent,' Kilby said. "Essentially my job was to see if people really needed to be there or to get them on their way and give them a little bit more time to decide what was going on with them. I was right at the entrance to the medical tent."

Questions:

- **"There were two doctors stationed outside of the medical tent and they would either triage people to my section, in the chairs or straight into the medical tent,"**
- Aaaaand here we are again with another alleged medical professional apparently having no problem with seeing a random collection of sick or dying people, loaded into wheelchairs and pushed **"75-100 yards"** down the road to be "triaged."
- What if, after some of the patients have been wheeled to the tent, the "triage" doc discovers they had severe spinal injuries, needed a backboard and are now paralyzed from the neck down?
- Or what if they bleed out while being wheeled down the road by a helpful cowboy, or waiting inline to be given their little red tags and sent to hospital?

- See, this is why initial triage is done *on the scene*.
- Remember?

Alexander E. Halstead, RN

No LinkedIn or other professional page I could find but here is his name in a list of 2011 graduates:

<http://healthcarenews.com/nursing-graduates-2011/>

Role in Boston Marathon bombing:

Claims to have been with the EMS in the medical tent.

<http://www.legislativegazette.com/Ar...-Marathon.html>

What they claim to have observed:

"The first victim to come into the tent was an image I would never forget: a young man was wheeled in with both of his legs amputated by the blast. He was awake, and had mere strands of flesh hanging down from both of his legs [Bauman]. It was surreal... It was mass pandemonium. Triage sections were set up in the tent so that the victims with more severe injuries would be transported first. A subsection of the tent was assigned as the morgue.

*I snapped into gear. I had the training, and now I just had to use it. I walked up to **one of the victims awaiting transport(?)**. He already had tourniquets on both of his leg amputations, and the bleeding was controlled. I started an IV and hung fluids. But what else could I do for this man? He needed surgery and we could not do that in the tent. There were four other doctors and nurses around his stretcher, so I stepped back for a moment to collect my thoughts. Could this all be real? Or was this just a horrible nightmare that I would surface from soon?*

*...I then moved over to the Level 3 section of the tent. I found an adolescent girl and her mother who each sustained injuries to both legs. The girl was panicking that she would lose her legs. I reassured her. I started caring for the girl and her mother. I put in IVs, reviewed their injuries, and splinted their legs for transport. **I even started taking a blood pressure on the mother, when I soon realized that the number is meaningless in the chaos of a mass-casualty incident.***

***About 25 minutes** after the blast, we had **all 97** of the blast victims who came through our tent transported to hospitals. We transferred the remaining runners to Medical Tent B. Shortly after, the police moved us out of the tent and sectioned the road off as a crime scene. I heard another bomb go off, but was reassured by another volunteer that it was a controlled detonation by Boston police.*

"

Questions:

- Was the man you applied an IV to the same double amputee you described earlier? Was this Jeff Bauman? Why was such a severely injured man "awaiting transport" and relying on you to wander over and start an IV? Why had he not been transported to hospital immediately?
- As an RN why would you consider a patient's blood pressure to be "meaningless in the chaos of a mass-casualty incident"? Why would you not be aware that her b/p was a vital indicator of how badly she was bleeding out?
- What was the rationale behind attempting to treat people with potential "neurological, cardiovascular" and airway

trauma in a first aid tent? What could be done for them there that could not be done better in an ambulance on the way to hospital?

- As a nurse were you not concerned that the delays in emergency care caused by treating severe trauma in an inadequately prepared medical tent might result in unnecessary deaths?

Alex Coletta, RN

NO INFORMATION FOUND SO FAR TO VERIFY IDENTITY

Role in Boston Marathon bombing:

Claims to have been with the EMS in the medical tent.

<http://byond.phablettrend.com/marath...seen-usa-today>

What they claim to have observed:

...Three people carried in a woman. One of her legs was blown off. Someone was holding it. The woman was "dripping blood all over" and "wailing in pain," Coletta says. "I have never seen anything like that," she says. "I will always remember that."

"When people came in, we used coats, belts, anything we could to stop the bleeding," she says. One woman had a life-threatening injury to her heel, bleeding profusely from an artery, Coletta says. "Debris from the blast must have also hit her in the mouth, because her lips were also bleeding." A man's belt was used on the woman's thigh to stop the bleeding, and Coletta dressed the heel wound.

She assisted another woman with a broken leg who had a tibia bone sticking through the skin. Coletta says she held the wounded leg while waiting for EMS personnel to come with a splint. **It was the first time she had ever seen a bone sticking out of someone's skin,** she says. **Coletta also tended to a young man with two broken legs who was "crying a bit and in shock."** **He was shaking and blankets were put around him. "It looked like he had lost a lot of blood and something had crushed his ribs,"** she says. **"He had indentations in his chest."** She assisted at least two other people with less serious injuries — one bleeding from an arm injury and one with a facial injury.

Medical workers set up a morgue in the back of the tent where, two hours earlier, Coletta had a pleasant lunch with nursing colleagues. She says an adult who died in the bombing was on a cot, covered by a sheet. "It absolutely had an effect on me," Coletta says. "It froze me. I didn't know whether to go over to the person or get back to assisting others." She wonders whether the body was a person who had been in cardiac arrest, carried on a stretcher as EMS workers pounded on the chest.

Questions:

- Can you identify the woman with one leg blown off, the woman with the open tib fracture and the man with two broke legs?
- Using a belt as a tourniquet is standard, but as an RN you must be aware that a "coat" would be useless as a method to "stop the bleeding," so why were you and other trained personnel attempting to use such a thing for the purpose? Why did you not obey your training and use bandages, scarves, or anything that could be tied or twisted

appropriately?

- If you are indeed a qualified nurse, isn't it quite strange that you had *never* seen a traumatic amputation before? Isn't it even stranger that you had *never seen an open tibia fracture*? Did you never work in orthopedics, or an ER? Did you never even study trauma as part of your training? Don't you think describing an open fracture as a "bone sticking out of someone's skin." is an odd way for a trained RN to talk?
- You also say that the sight of a dead body covered by a sheet "froze" you. Are you claiming that *you never saw a dead body before either*? Would it be fair to suggest at this point that your training sounds to have been a bit lacking in some major areas?

Fred H. Brennan jr, MD

Links to the military:

<http://www.sosmed.org/fred-brennan.html>

Role in Boston Marathon bombing:

Claims to have been in "medical tent B".

<http://blogs.bmj.com/bjbm/2013/05/13...ston-marathon/>

What they claim to have observed:

*"We heard and felt the blasts. Everyone in the medical tent froze in place. **The flat screen monitors went dead, cell phones stopped working, and we lost all communications with the rest of the medical command.** I stood on a milk crate and got on the tent intercom system. "We all need to stay calm. We don't know what has happened yet but there is a good chance that we will receive casualties. Stay in the tent, take care and stabilize your current athletes, and let's get the tent ready to receive trauma casualties." The response from the volunteers was incredible. No panic, no hesitation, and a total team effort. **During this time the first responders at the finish line, including Tent A marathon medical personnel, heroically triaged and stabilized the casualties. We were told to stay put in Med Tent B as the blast area was not secured and more explosive devices were possible.** We received 3 minor shrapnel injured patients and saw the psychological effect on the spectators. People were running frantically trying to either get away from the blast area or looking in horror for their loved ones in our medical tent. Runners were diverted to the Boston Commons as the course finish area was secured and evacuated. **Amazingly most of the casualties were evacuated from the finish area within 30 minutes.** It was an incredulous(sic) response to a tragic event.*

Questions:

- The photographs show us that the large majority of severe traumas were "triaged" by non-medical people applying inadequate and potentially life-threatening tourniquets. Given this obvious lack of trained staff on the scene, does it not seem odd that you and the other medical personnel in "tent B" were told to stay away and wait in the tent?

Vivek M. Shah, MD

<http://www.healthgrades.com/physicia...ek-shah-3fbkwl>

Role in Boston Marathon bombing:

Claims to have run the marathon, bib no 21943 and then helped out on the street after the blast.

<http://video.msnbc.msn.com/martin-ba...61272#51935422>

What they claim to have observed:

"we heard a loud boom and we saw a big puff of smoke "

He witnessed "traumatic amputations of one leg, both legs, it just looked like everybody was in shock. If you looked into all the victims' eyes, they really didn't know where they were.... "

*"...people were using their marathon long sleeve shirts. the thing that was amazing was i was only 25 yards away and by the time i got there, the first responders, the volunteer physicians, were already there. so **i've never really seen a response as quick as what i saw yesterday.**"*

*"I just tried to see if anybody needed any emergent care if anybody was bleeding out, myself and some of the other emergency personnel **put on some makeshift tourniquets** "*

"but within a minute he said emergency physicians were on site attending to every victim"

Questions:

- What were people using their "marathon long-sleeved shirts" for? If the answer is (as it usually seems to be) "tourniquets" then, as a trained physician, you must know a long-sleeved shirt would be useless for such a practice and would probably make the bleeding worse. So, why are you talking about it on TV as if it was a good thing?
- You say you have "never really seen a response as quick" - but video and photographs of the scene show severely injured patients left lying unattended on the sidewalk while EMTs stand by. They show apparently serious casualties being attended by unqualified members of the public and a majority of tourniquets applied incorrectly so as to be a hazard to survival. They also show that severely injured people were treated in the first aid tent rather than being transferred immediately to hospitals, even though the tent had no blood or other trauma-management resources. In what sense, then, do you consider the response of the emergency team to have been "quick"? Do you also consider it to have been appropriate?
- Given the plurality and frequency of failures listed above would you not agree that, far from being an unusual success, the emergency response was incoherent, inexplicable, and counter-productive? Would you not also agree it's miraculous that more people didn't die from their injuries?

Gregory Antoine, MD

<http://www.bumc.bu.edu/surgery/people/antoine>

Links to the military (Residency: Walter Reed Army Medical Center)

Role in Boston Marathon bombing:

Claims to have been in the ER at Boston General

What they claim to have observed:

*"The emergency room was like a zoo. People were crying, screaming. The injuries looked like those you would find **in a combat zone.**"*

*Of dozens Antoine helped treat, two stand out: **One was a man***

who had both his legs blown off. As Antoine worked on him, **drapes concealed everything but the man's mangled limbs.** A couple of days later, Antoine realized it was the person in the iconic photo — Jeff Bauman being wheeled to a makeshift medical tent...

The other patient was a 65-year-old man who had flown from California to see his daughter-in-law finish the race. Shrapnel severed the sciatic nerve in his left leg. **"That's the nerve that controls motor skills,"** Antoine said. "I met his wife and son. Really nice people. The man was a contractor who built hospitals, of all things." "

<http://www.usatoday.com/story/news/n...sippi/2324305/>

Questions:

- You claim in one part of the article that you were "**in the emergency room that day helping to decide which patients needed surgery the quickest,**" but in another that "**drapes concealed everything but [Jeff Bauman's] mangled limbs**" while you worked on him. The latter sounds as if he was in theatre and you were operating.
- So, were you in the ER triaging patients, or in the OR operating on them?
- Your specialty is otolaryngology and facial reconstructive surgery, *not* orthopedics, so, if your second story is the true one, *why were you operating on Bauman's legs and the unnamed gentleman's sciatic nerve?* Presumably they have orthopedic surgeons and neuro surgeons at BG? Surely Bauman would have been a priority for them, and you ought to have been dealing with facial lacerations - or did normal protocol just completely go to hell that day?
- At what point in your basic training were you told to describe the sciatic nerve as the one "**that controls motor skills**"? The sciatic nerve controls sensation and movement in the lower limb.
- As an "associate professor of surgery" you probably ought to know that - especially before you try to repair one.

Last edited by QuidSapio; 22 May 2013 at 13:59 PM. Reason: refined the "questions"



The Following 14 Users Say Thank You to QuidSapio For This Useful Post:

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14 May 2013 , 11:44 AM

#2

felixfelix

Re: The Alleged Medical Witnesses

Writer

Good idea to record the people in the tent.

Join Date: 21 Apr 2013

One here...

Posts: 493

<http://www.msnewsnow.com/story/22008...n-medical-tent>

Threads: 2

Thanked 1,117 Times in 426 Posts





another out of town dr...

JACKSON, MS (Mississippi News Now) - **Dr. Richard Guynes is a life-long runner.** So, the chance to be a part of the Boston Marathon medical team was a dream. But that dream turned into a scene out of a nightmare Monday.

"All of us quickly realized that there had been some kind of an attack or bombing and the scene was going to be forever changed and we were not going to be taking care of runners any longer probably," recalls Guynes.

Because the tent was only 100 feet from that first explosion, it wasn't long before the injured started coming through.

"The first 10 to 20 were many gruesome injuries that I, of course, would not have ever seen as a cardiologist," Guynes explained.

Guynes' section helped stabilize those who didn't have life-threatening injuries. But other doctors were calling for assistance throughout the tent.

"I did have the opportunity to try to help a lady. Krystle Campbell, I believe is her name, who did ultimately pass away, unfortunately. She was already in shock and had bled a great deal and had bled a great deal before she made it into the tent. Her face, I've seen it on television. She looks completely different than when I saw her in the tent," said Guynes.

He says about an hour passed at the tent before everyone cleared but because it was so chaotic, it seemed like much longer.

"A lot of memories of some of the other people that I got to know and talk to while we were just starting IVs and trying to reassure them or help them text or call family members on our cell phones or their cell phones," Guynes said.

While it's tough for Guynes to see the images from that day, he's struck by the goodness of strangers he saw at the scene.

"A lot of just common, just ordinary people rose up. Bystanders, EMS people, medical volunteers and just did things they weren't prepared to do," explained Guynes. He plans to participate in next year's marathon as a show of support. He hasn't decided if he will run the race or work at the medical tent again.

[video]



The Following 6 Users [do2read](#), [greeneye656](#), [joanneatom](#), [Mindtrick](#), [QuidSapio](#), [Saoirse](#)
Say Thank You to
[felixfelix](#) For This
Useful Post:

felixfelix

Writer

Join Date: 21 Apr 2013

Posts: 493

Threads: 2

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**Re: The Alleged Medical Witnesses**

Quote:

A 1990 [Bolingbrook High School](#) graduate and doctor was working in the medical tent at the finish line of the Boston Marathon when two explosions went off, killing three people and wounding at least 170 others.

Dr. Jocelyn Hirschman grew up in Bolingbrook and now works in northern Boston. The tent was set up to treat blisters, dehydration, hypothermia and post-race injuries.

After the two blasts, the tent quickly became a trauma unit, as "bloodied spectators" and runners were carried in.

"The BAA medical teams and Boston EMS were amazing," Hirschman said.

"They immediately converted the tent into a mass casualty triage center and organized us into teams to assist in stabilizing the injured. Despite the harrowing and gruesome images I will always carry with me, I also remember the true heroes of the day - the Boston EMS, the athletes and the brave injured."

Roger Hirschman, Jocelyn's father, told Patch that he spotted his daughter in a photo running to tend to the wounded on streets covered in blood. Everyone was "unbelievably professional," she said. Even the injured children were stoic.

The scene was like a war zone, one medical tent nurse told [Tewksbury Patch](#).

"I had worked in an ER, so I'd seen (traumatic) injuries, but nothing like this. There was just lots and lots of damage," said **Kim Giroux**.

"There were two people who were (declared) dead in **Tent A**. There were traumatic amputations, one man with both legs blown off by the explosion. There were people impaled by metal and glass -- compound fractures. It was like a war zone."

Getting out of the area was a "really bad nightmare" for Jocelyn, Roger Hirschman said. Her car was now in a restricted area. Her cell phone ran out of power. She walked for miles to get out of town and connect with someone to take her home.

<http://bolingbrook.patch.com/article...hon-explosions>

Albany doctor recounts experience helping victims at Boston Marathon

<http://www.legislativegazette.com/Ar...-Marathon.html>



April 22, 2013

Quote:

Behind her smile and calm demeanor, you would never guess that **Dr. Kim Kilby**, just days earlier **was pushing a wheelchair carrying a semi-unconscious woman away from the blast site of the Boston Marathon.**

Kilby, certified in family medicine and preventive medicine, was at the finish line of the Boston Marathon as a volunteer physician last Monday

when two bombs exploded, killing three and injuring more than 170 others. As the medical director for the local Mohawk Hudson River Marathon she is "always trying to look for ways to make our race safer and make sure we're doing everything correct," and was at the race doing research and volunteering.

Kilby is also the dean of undergraduate medical education at Albany Medical Center, where one of her student's mothers happened to be the charge nurse at the Boston Marathon medical tent. She reached out to the student's mother who suggested that she come to Boston to see how the medical facilities are managed there.

"Boston is a much, much larger race than the Mohawk Hudson River Marathon and when you have more runners you have the potential to see more serious things happen in the medical tent," Kilby said. "I wanted to see how they dealt with that and also their set up — if they have different protocols if they have different resources that maybe we should include in our race, even though it's a smaller scale."

What was supposed to be a learning experience quickly changed into a lesson on mass trauma. The first explosion occurred shortly before 3 p.m. during the fourth hour of the race; the second explosion followed seconds later.

"When the first blast went off everybody sort of stopped in their tracks," Kilby said. "It took everybody off guard. Then the second blast happened and I had one of our medical students working with me on my team and she said 'what was that?' and I said 'don't worry, stay calm, I'll be right back,' and then I went outside of the medical tent and looked down the street towards the finish line. There was smoke and you could smell the smoke and then people had started running and screaming toward the medical tent at that time."

The tent Kilby and her team were working in was 75 to 100 yards away from the finish line, close to where the initial blast occurred. Kilby was immediately put in charge of the second layer of triage toward the front of the medical tent.

"There were two doctors stationed outside of the medical tent and they would either triage people to my section, in the chairs or straight into the medical tent," Kilby said. "Essentially my job was to see if people really needed to be there or to get them on their way and give them a little bit more time to decide what was going on with them. I was right at the entrance to the medical tent."

Rather than being surprised or scared after the explosions, Kilby said there was no fear involved in her thought process to help the wounded at the blast site. "It was more 'what do I do?' and 'what's my job and how do I make that happen?'"

■

■

Kilby called the transition between treating runners and triage "instantaneous" saying there were perhaps a few moments of chaos among the doctors, but they transitioned quickly.

Many of the injuries that Kilby saw were bleeding injuries involving the lower extremities or injury to the lower extremities. Many of which were open fractures, vascular injuries and profuse bleeding.

Triage was set up in three different levels depending on how critically ill a patient is. Level one, the most grave, involved patients who were

unconscious, having respiratory trouble, cardiovascular troubles and a large amount of bleeding that could cause either cardiovascular or respiratory difficulty. Level three, on the other hand, targeted people who were awake and alert but have an obvious injury, but their neurological and cardiovascular status was stable.

A message over the loudspeaker prompted physicians to go toward the site of the explosion and Kilby promptly followed.

"There were lots of people injured on the sidewalk, lots of people assisting them and I was thinking, basically, that I needed to get to one particular patient and do my best to help them," Kilby said.

A video of Kilby and another person pushing a wheelchair with an injured woman was caught on camera and featured on a segment of "Good Morning America" titled "Heroes Emerge from Boston Marathon Bombing."

"I was involved with about seven patients directly," said Kilby, "however, it's important for everybody to understand that there was a team of people around every single patient that was brought to the medical tent and that speaks very much to what was already in place for the safety of the marathon prior to this happening. They had such a huge amount of resources and such a structure that was very impressive to be able to handle just the marathon runners and every patient had a team of people helping them."

Kilby, who had never responded to a mass casualty event prior to the bombing, recounted the sight of one badly-injured victim. "The woman that I ended up helping already had some people tending to her, one of which was a runner that clearly had just finished the marathon. He probably had some kind of medical training because **he had already fastened a belt as a tourniquet on her lower extremity.** She was in and out of consciousness. Everything happened pretty fast, our whole focus was on getting her safely into the wheelchair and getting her, as fast as possible, to the medical tent."

The woman was then transferred to a team at the medical tent and **Kilby returned to the blast site to seek out other injured victims.** The Boston Athletic Association and the medical team has begun to receive emails from victims, giving Kilby hope she will hear how her patients at the marathon are doing now. She credited Dr. Pierre D'Hemecourt, the medical director of the Boston medical tent and his team for the leadership displayed in such a chaotic event.

"Everybody just fell into line. I couldn't be more impressed with what happened in terms of the medical volunteers," Kilby said.

Kilby is planning on running in the New York City marathon in 2014 and says she has no concerns about the safety of future marathon events, citing that it is important that there be a continuation of these events.

"I'm an endurance sports participant as well, said Kilby. "I'm training for an ironman right now and I run marathons. I think when I think about that aspect, because it's something personally important to me, when I think about it from that respect, it definitely makes you very sad, because these events are all about being positive, stretching yourself to new limits and growing and also bringing together community."

After triage, the medical team stayed on scene until they were ordered to leave by police. Kilby drove home that afternoon and spent the majority of the time on the phone with her family for support. "In that moment, it was very surreal. Like it never even happened," Kilby said.

"I definitely felt a sense of, again amazement, of how well everything happened as well as you could expect in those circumstances ... I think you can't not be changed by something like this," Kilby said. "So certainly I'm sure that over the next weeks and months it will continue

to evolve and I definitely feel a sense of pride that I've been able to help in some way as part of this response."



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14 May 2013 , 12:26 PM

#4

QuidSapio
Thinker

Join Date: 19 Apr 2013

Posts: 219

Threads: 2

Thanked 769 Times in 194 Posts



Re: The Alleged Medical Witnesses

Thanks Felix - I think I'll keep adding the new names to the first post.



The Following 4 Users **clive**, **greeneye656**, **joanneatom**, **Paula** Say Thank You to **QuidSapio** For This Useful Post:

14 May 2013 , 12:38 PM

#5

felixfelix
Writer

Join Date: 21 Apr 2013

Posts: 493

Threads: 2

Thanked 1,117 Times in 426 Posts



Re: The Alleged Medical Witnesses

<http://twanasparks.org/marathon-medi...sualty-center/>



April 17 2013

Quote:

This was the third year that **Irene Davis**, the director of Harvard University's **Spaulding National Running Center**, had volunteered her physical therapy services

to the Boston Marathon. A little before 3 p.m. on Monday, she was standing near the back of **Medical Tent A**, talking to her husband, who questioned whether they were needed any longer.

"It was a beautiful day, not hot like last year when we had so many heat injuries," she said. "It was really quiet in the heat injury section of the medical tent."

She decided to stay in case the next wave of runners coming in needed help. A few minutes later, the bombs exploded.

The first thing she did was look at her husband's face.

"He was in Special Forces for 20 years,so I know he knows what a bomb sounds like," Davis said.

Within five minutes victims with traumatic blast injuries began pouring in, Davis said. The tent, which spanned an entire city block, was set up near the finish line to deal primarily with typical running injuries. In an instant, it was transformed into a mass casualty center.

For several hours, Davis pitched in where needed, wrapping wounds, monitoring vital signs and helping to transport patients in need of greater care to nearby hospitals.

Audio report, **Kim Giroux**

<http://hereandnow.wbur.org/2013/04/1...n-medical-tent>

Kim Giroux, a nurse from Tewksbury, Mass., was volunteering at a Boston Marathon medical tent at the time of the bombing.

"I was actually sitting in the medical tent, treating one of our returning war veterans who ran the race in full gear, with his fatigues, the backpack, boots, being treated for dehydration when the first blast went off," Giroux told *Here & Now's* Robin Young.

While Giroux had been trained for this situation, she had never seen wounds like these.

"There were penetrating wounds, people that were impaled with metal, glass. There were burns, there were amputations, cardiac arrest, several children with injuries," she said. "We have had training, but we never had real wounds. You know, you're training has always been simulation, where you are told that this is what's coming in, but you never see it. Yesterday I saw it. I hope I never have to live through that again."

Giroux says she hasn't been able to sleep since the attack.

"I just kept waking up with visions of what I had seen yesterday," she said. "I had to turn the TV off because I kept seeing the face of those that came through that medical tent."

[3.42 mins]

another out of state doctor...this time a runner

<http://www.kob.com/kobtvimages/repos...lle-deines.jpg>



Posted at: 04/16/2013 10:14 PM

A UNM Hospital resident intern was caught in the middle of the tragedy and chaos Monday in Boston. Instead of running for safety, she got to work.

Danielle Deines spends almost every day at UNMH working with patients. On Monday, she ran her first Boston Marathon. Little did she know, she'd end up treating patients on the streets of Boston.

Danielle remembers the cheers, the looks on everyone's faces, as she made her way through parts of Boston. "So much excitement the whole way down the course. It was a great day for everybody really up until then," said Danielle.

She finished the race in 3 hours and 15 minutes. She was in the medical tent, being treated for severe leg cramps, when she heard the first explosion. "At first, we were just kind of looking at each other going, 'what was that?'"

Seconds later, another one. "I looked at her and I was like, look, if that was actually something real, whatever it was, I'm a doctor so please put me to work," added Danielle.

Barely able to walk because of her leg cramps, Danielle got up and started working. The injuries she saw were what you would see in a war zone. "There were a couple of people who, like the guy who we sent in the ambulance. He had a leg that was

partially severed off at the bottom,” said Danielle.

It’s been more than 24 hours and the images and sounds linger. She can’t get them out of her head. “Seeing some of the worst injuries and then just replaying the whole thing in my head of where could I have helped more or what could I have done differently or that sort of thing,” said Danielle.


Danielle told KOB Eyewitness News 4 the streets of Boston are very quiet Tuesday night.

Police are on almost every corner near where the explosion occurred.

She said she’ll be back to work in Albuquerque next week. She also said she does plan on running another Boston Marathon.



The Following 6 Users [clive](#), [do2read](#), [greeneye656](#), [joanneatom](#), [Mindtrick](#), [Paula](#)
Say Thank You to
felixfelix For This
Useful Post:

 15 May 2013 ,
02:27 AM

felixfelix

Re: The Alleged Medical Witnesses

Writer

I think it worth noting the two tents designated A and B.

Join Date: 21
Apr 2013

According to Dr Jocelyn Hirschman (quoted in earlier post)

Posts: 493

"There were two people who were (declared) dead in **Tent A**. There were traumatic amputations, one ma
legs blown off by the explosion. There were people impaled by metal and glass -- compound fractures. It
war zone."

Threads: 2

Thanked 1,117
Times in 426
Posts

Let's now look for Tent B



<http://blogs.bmj.com/bjbm/2013/05/13...ston-marathon/>

[Reflections -from the medical tent- on the 2013 Boston Marathon](#) 13 May, 13 | by Karim Khan

By Dr. Fred H. Brennan, Jr.



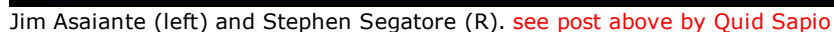
Fred with daughter Alyssa, 18 who was shadowing her dad

We heard and felt the blasts. Everyone in the medical tent froze in place. The flat screen monitors went out, cell phones stopped working, and we lost all communications with the rest of the medical command. I stood in the tent and got on the tent intercom system. "We all need to stay calm. We don't know what has happened but there is a good chance that we will receive casualties. Stay in the tent, take care and stabilize your current patients and let's get the tent ready to receive trauma casualties." The response from the volunteers was incredible, no hesitation, and a total team effort. During this time the first responders at the finish line, including Team Boston marathon medical personnel, heroically triaged and stabilized the casualties. **We were told to stay put in Tent B as the blast area was not secured and more explosive devices were possible. We received 3 shrapnel injured patients** and saw the psychological effect on the spectators. People were running far from the tent to either get away from the blast area or looking in horror for their loved ones in our medical tent. **Runners were diverted to the Boston Commons as the course finish area was secured and evacuated. Amazingly, all the casualties were evacuated from the finish area within 30 minutes.** It was an incredulous and tragic event.

looks like there was not much going on at tent B but he does mention shrapnel patients..

<http://edition.cnn.com/2013/04/15/us/boston-marathon-eyewitnesses>

Tent B is where Segatore started work before transferring to tent A where most of the action took place.



<http://articles.timesofindia.indiatimes.com/India/Earthquake-in-Nepal-kill-at-least-18000-people/articleshow/6790101.cms>

I was in Tent B when I saw people running around, **but did not realize there had been blasts as I did not hear any sound despite being barely 200m away.**

The runner was **Bhasker Desai** from California, bib no. 18760 who crossed the finish line at 3:46:26

well fancy that!

[clive](#), [do2read](#), [goodomens97](#), [greeneye656](#), [joanneatom](#), [Mindtrick](#), [PCGeek](#), [QuidSapio](#)

#7

Re: The Alleged Medical Witnesses

<http://medcenterblog.org/2013/05/i-a...arathon-nurse/>



Threads: 2

Threads: 2

Thanked 1,117 Times in 426 Posts



May 2, 2013

UMMC critical-care nurse **Alexander E. Halstead**, 24, was among the trained volunteer staff in the medical tent near the finish line of the Boston Marathon April 15, 2013, when two bombs exploded, killing three people and injuring more than 260. In addition to his detailed account below, you can [view his interview on WBAL-TV](#).

**By Alexander E. Halstead, BSN, RN, CCRN
Clinical Nurse II, Surgical Intensive Care Unit
University of Maryland Medical Center**

Boston EMS personnel had been stationed in the respiratory care section of the tent, and all of their radios went off simultaneously.

The first victim to come into the tent was an image I would never forget: **a young man was wheeled in with both of his legs amputated by the blast. He was awake, and had mere strands of flesh hanging down from both of his legs. It was surreal.** The patients started rushing in, filling every corner of the tent. All ages were present among the victims. It was mass pandemonium. Triage sections were set up in the tent so that the victims with more severe injuries would be transported first. A subsection of the tent was assigned as the morgue.

I snapped into gear. I had the training, and now I just had to use it. I walked up to one of the victims awaiting transport. **He already had tourniquets on both of his leg amputations, and the bleeding was controlled.** I started an IV and hung fluids. But what else could I do for this man? He needed surgery and we could not do that in the tent. There were four other doctors and nurses around his stretcher, so I stepped back for a moment to collect my thoughts. Could this all be real? Or was this just a horrible nightmare that I would surface from soon?

A physical therapist in tears approached me. She was extremely upset that none of the runners were being treated for their injuries. I quickly eyeballed the remaining runners in the tent to make sure they had no life-threatening injuries.

I then moved over to the Level 3 section of the tent. **I found an adolescent girl and her mother who each sustained injuries to both legs. The girl was panicking that she would lose her legs.** I reassured her. I started caring for the girl and her mother. I put in IVs, reviewed their injuries, and splinted their legs for transport. I even started taking a blood pressure on the mother, when I soon realized that the number is meaningless in the chaos of a mass-casualty incident.

About 25 minutes after the blast, we had **all 97 of the blast victims who came through our tent transported to hospitals. We transferred the remaining runners to Medical Tent B.** Shortly after, the police moved us out of the tent and sectioned the road off as a crime scene. I heard another bomb go off, but was reassured by another volunteer that it was a controlled detonation by Boston police.

yes, it certainly was surreal; he's talking about Jeff

<http://www.wbal.com/news/maryland/baltimore-city/Baltimore-nurse-vows-to-return-to-Boston-Marathon/-/10131532/19866812/-/1275og3/-/index.html>

"he was the first victim coming into the tent and the moment that I saw him was when the incident became real for me"

7:05 AM EDT Apr 24, 2013



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[clive](#), [do2read](#), [greeneye656](#), [joanneatom](#), [Mindtrick](#), [PCGeek](#)

Join Date: 8 Feb 2011

Posts: 359

Threads: 26

Thanked 1,298 Times in 307 Posts



Re: The Alleged Medical Witnesses

I wonder if this Halstead is related to the Halsteads of Sandy Hook fakery ?

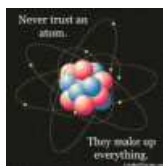


The Following 3 Users **clive**, **greeneye656**, **joanneatom** Say Thank You to **PCGeek** For This Useful Post:

15 May 2013 , 08:40 AM

#9

joanneatom
Free Mind



Join Date: 6 Dec 2012

Location: UK

Posts: 1,089

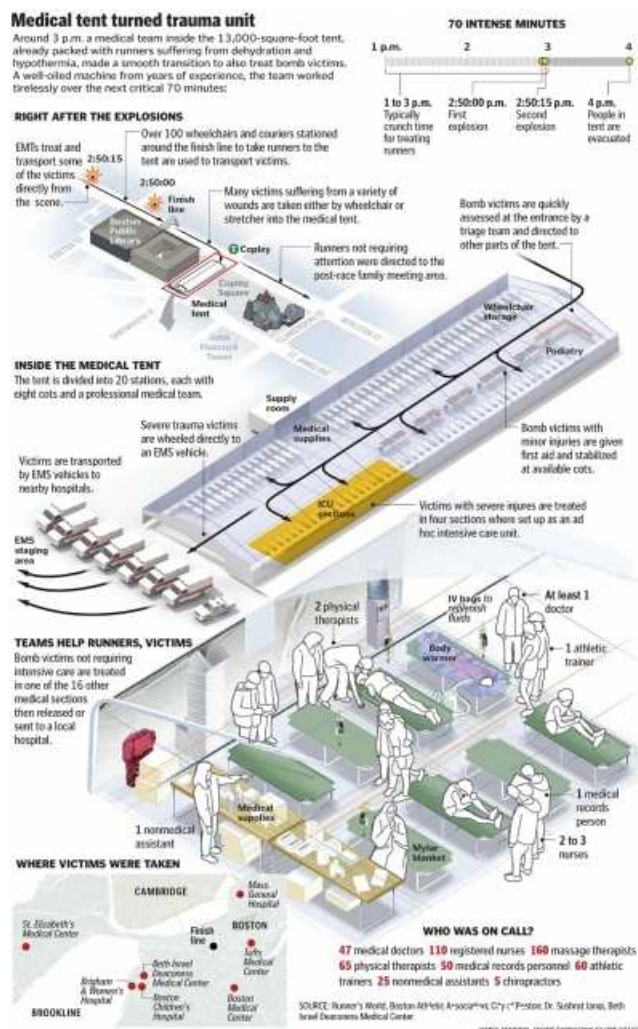
Threads: 10

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Re: The Alleged Medical Witnesses

Info-graphic of the set-up in the medical tent.



Source: www.bostonglobe.com

You may have to enlarge it to read the print. It was too big to host at LRF, so I had to shrink it.

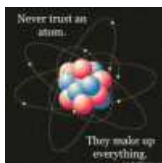
..Never trust an atom...they make up everything....



The Following 3 Users [clive](#), [greeneye656](#), [pinewood](#)
Say Thank You to
[joanneatom](#) For This
Useful Post:

15 May 2013 , 09:19
AM

joanneatom
Free Mind



Join Date: 6 Dec 2012

Location: UK

Posts: 1,089

Threads: 10

Thanked 2,361
Times in 840 Posts



Re: The Alleged Medical Witnesses

(non)Scenes from inside the medical tent.



LetsRollForums.com



Source for all three: www.getty.co.uk



Source: www.dogpileimages.co.uk



Source: www.getty.co.uk



Source: www.info.co.uk



Source: www.bostonglobe.com

When the 70 mins of 'pure hell' was over, they gave themselves a cheer.



Source: www.dogpileimages.com

Where's the blood?

..Never trust an atom...they make up everything....



The Following 7 Users
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joanneatom For This
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[clive](#), [felixfelix](#), [goodomens97](#), [greeneye656](#), [Mindtrick](#), [pinewood](#),
[QuidSapio](#)



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[The Lets Roll Forums - Top](#)

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